

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/059476	FILED DATE
APPLICANT(S)							
5-24-09 RAE CLAIMS							
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						51	
2						52	
3						53	
4						54	
5						55	
6						56	
7						57	
8						58	
9						59	
10						60	
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13						63	
14						64	
15						65	
16						66	
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40						90	
41						91	
42						92	
43						93	
44						94	
45						95	
46						96	
47						97	
48						98	
49						99	
50						100	
TOTAL IND.	2	TOTAL DEP.	15	TOTAL IND.	2	TOTAL DEP.	15
TOTAL	17	TOTAL	17	TOTAL	17	TOTAL	17

BEST AVAILABLE COPY